
CHAPTER 13. ADMINISTRATIVE AND INFORMATION MANAGEMENT

13-1. INTRODUCTION

a. General. Operating a medical treatment facility requires much more than just medical supplies and equipment. Many administrative items of equipment are essential. Since a great number of administrative items are common requirements throughout all organizations in the Army, central controls have been established for certain categories of equipment to optimize expenditures and encourage standardization. The number of controls has made the MEDCASE/SuperCEEP manager's job more complex.

b. Funding. Non-medical equipment that is normally managed and funded by another DA-level program, such as security equipment, may be considered for funding through the MEDCASE/SuperCEEP program. However, it must be determined that the proper program will not be able to meet an immediate mission requirement of the health care activity. The AMEDD policy regarding the funding of such equipment is provided in chapter 2. To qualify for MEDCASE funding, requirements must meet the threshold of \$250,000 or greater (unit or system price). To qualify for SuperCEEP funding, requirements must be equal to or greater than \$100,000 and less than \$249,999 (unit or system price).

c. Evaluation. Administrative items must be carefully evaluated against the eligibility criteria. Careful evaluation is necessary for several reasons. First, it is necessary to ensure that no time is wasted due to disapprovals. Second, it is necessary to conserve MEDCASE/SuperCEEP program funds for use with MEDCASE/SuperCEEP eligible items. Finally, it is necessary to ensure application of the appropriate management controls specified in various regulations. When questions about the eligibility of specific items arise, they should be forwarded either to the USAMMA or USAMEDCOM. Responses will be provided in writing, when necessary.

d. Submission. When other-than-MEDCASE/SuperCEEP-approval channels are required, these approvals must be obtained before action code 1A (approval) can be assigned to a MEDCASE/SuperCEEP requirement. Type Classification and IMA approval are typical of the types of approvals that are required outside of MEDCASE/SuperCEEP approval channels. The originating activity is responsible for originating all documentation required to secure approval of the requirement. In general, a copy of appropriate approvals outside of the MEDCASE/SuperCEEP program must be submitted with DA Forms 5027-R/5028-R. These approvals enhance the consultant review process. When non-MEDCASE/SuperCEEP approval channels parallel the MEDCASE/SuperCEEP approval channels, both types of documentation may be submitted together, but the non-MEDCASE/SuperCEEP approval must be completed first at each level of review.

13-2. TDA APPROVAL AND TYPE CLASSIFICATION EXEMPTION

a. General. Nonmedical standard-type-classified equipment (see SB 700-20, chapter 2, [Cataloging of Supplies and Equipment, Army Adopted Items of Materiel, and List of Reportable Items]) will not be approved for acquisition until the item is

approved for the TDA. Request for standard-type-classified equipment will be submitted in accordance with AR 71-32.

b. Documentation. Memorandum requesting type-classification exemption and TDA approval will be submitted along with the DA Forms 5027-R/5028-R and other documents to the USAMMA for submission to the USAMEDCOM. The letter will contain the following information:

- (1) Manufacturer's nomenclature
- (2) Model number
- (3) Quantity required
- (4) Unit price
- (5) Manufacturer's name and mailing address
- (6) Manufacturer's brochure if available
- (7) A statement that there is not an acceptable standard item in the supply system. (Line Item Numbers [LINs] of items considered but found unacceptable will be listed.) Refer to SB 700-20 for LINs.
- (8) Applicable TDA paragraph and name of the using activity
- (9) MEDCASE/SuperCEEP ACN
- (10) The name and telephone number of an individual able to discuss the requirement

c. Approval. TDA authorization does not constitute eligibility for the MEDCASE/SuperCEEP program. TDA authorization merely permits acquisition of the item. The funding level requirement for the DA-level program must be determined based upon the nature of the equipment and applicable Army regulations.

13-3. INFORMATION MISSION AREA (IMA) SOFTWARE AND HARDWARE

a. General. Congressional direction, DOD, and Army guidance state the acquisition, modification, and support costs for purchase of IMA software and hardware must be funded with O&M funds if the cost is less than the expense/investment threshold of \$250,000. MEDCASE and centrally managed SuperCEEP funds are used if the cost is equal to or greater than the threshold of \$100,000. The only exception to this rule is the acquisition of all ADPE at Research, Development, Test and Evaluation (RDTE)-funded facilities will be financed with RDTE funds, regardless of cost.

b. Systems. The "system" concept must be considered in evaluating the acquisition of IMA end items. A system exists if a number of components are designed primarily to function within the context of a whole and will be interconnected to satisfy an approved Army requirement. Fragmented or piecemeal acquisition of the documented requirement will not be used as a basis to circumvent the "system" concept.

c. Installation. Normal installation costs will be included as part of the total IMA system cost.

d. Training. IMA training will normally be funded separately with O&M funds or RDTE, and **not** included within the cost of the total system. However, when the cost of training is included as part of the original contract and is not separately priced, it then becomes part of the total system cost and is funded with the same type of funds as the system.

e. Maintenance. Annual fees for maintenance will normally be funded separately with O&M or RDTE funds and **not** included within the cost of the total system. However, when the cost of maintenance/warranty service is not separately priced, it then becomes part of the total system cost and is funded with the same type of funds as the system.

13-4. COMMUNICATION/AUTOMATION DATA PROCESSING EQUIPMENT ACQUISITION

a. New Equipment/System Acquisition. The aggregate cost of an end item/system procured to address a valid requirement (including peripherals, installation and system unique software) will be used to determine whether it should be treated as an expense (O&M) or investment (OP) cost. Determination of what comprises an end item/system will be based on the primary function of the hardware and software to be acquired as stated in the approved requirements document.

b. An Example. The appropriate type of funds for the purchase of five stand-alone computers is determined by deciding whether the primary function of the computers is to operate as independent workstations (i.e., five systems) or as a part of a larger system. If the computers are designed to operate independently, they should be considered as separate end items and applied against the expense/investment criteria individually. If they function as a component of a larger system, i.e., interconnected and primarily designed to operate as one, then they should be considered a system and the total cost applied against the expense/investment criteria.

c. Additional or Replacement Equipment/System. When requirements necessitate adding/replacing or modifying equipment/software that is a component or support the functioning of an existing system, only the additional equipment/software costs (including installation) will be used to determine whether the acquisition is an expense (O&M) or an investment (OP) cost.

13-5. LOCAL AREA NETWORK (LAN) AND WIDE AREA NETWORK (WAN)

LANs and WANs are considered to be systems. As such, the total cost of all component parts must be applied against the dollar threshold to determine the appropriate color of money when the LAN or WAN is acquired as an add-on or upgrade to an existing system. If the WAN or LAN is part of the initial hardware/software acquisition, the cost will be included as part of the total system cost.

13-6. CENTRALLY MANAGED SYSTEMS

The acquisition of any system that is centrally managed is considered an investment regardless of the amount. Systems managed by an Army-Acquisition-Executive-Chartered Program Executive Officer or Program Manager are considered centrally managed systems.

13-7. TURNKEY ACQUISITION

Acquisitions where a single or prime contractor provides a complete system (i.e., hardware, software, installation, etc.), the system may be entirely financed with procurement funds. A turnkey system is typically large and at the point of contracting, the appropriate type of funds cannot be readily determined due to the nature of the system. Therefore, it is appropriate to budget and execute the entire acquisition within MEDCASE/SuperCEEP.

13-8. TELECOMMUNICATIONS EQUIPMENT

a. Base Communications Equipment. Base communications, which includes the following, must be developed and approved through an Information Management Plan (IMP)/Project Document, DA Form 5695-R-E (Information Management Equipment/Project Document):

- (1) Base radio stations (including hospital systems)
- (2) Radio paging systems
- (3) Outside plant television transmission facilities
- (4) Telecommunications support for automation systems

b. Hospital Unique Communications Equipment. Hospital unique communications equipment is used to support the operations or mission of a medical activity and does not have a frequency assigned or have a transmission interface with a commercial telephone system. Hospital unique communications equipment that otherwise meets the eligibility criteria stated in chapter 2 of this SB, may be funded through the MEDCASE/SuperCEEP program, provided that TDA approval and type-classification exemption are first obtained. Examples of hospital-unique communications equipment include:

- (1) Nurse call systems
- (2) Intra-hospital intercom systems
- (3) Emergency room telephone recording equipment
- (4) Dictation equipment
- (5) Telephone answering equipment
- (6) Hospital Radio Communication (Emergency Room)

13-9. BASE LEVEL COMMERCIAL EQUIPMENT (BCE)

BCE is a budget line of the same appropriation that funds MEDCASE/SuperCEEP. The BCE program funds other activities in the Army with TDA investment equipment in a similar fashion to the way the MEDCASE/SuperCEEP Program funds medical care support equipment. AMEDD activities do not participate directly in the BCE program.